

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M-F		
O.I.P.E. CLASSIFIER		10	4-9-01
FORMALITY REVIEW	NP	586	10-2-01
RESPONSE FORMALITY REVIEW	BZ	897	01-17-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	02/19/01
2	02/22/01
3	03/03/01
4	03/03/01
5	03/03/01
6	03/03/01
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9	03/03/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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50/900
 10/02/01
 004
 01/18